

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

Report Type:

X Final Report

☐ Amendment

(Year)

IMPORTANT:

THIS REPORT MUST BE FILED WITHIN 50 DAYS AFTER THE ELECTION.

FILE ORIGINAL AND TWO COPIES WITH THE OFFICE OF THE PUBLIC AUDITOR

OFFICE OF THE PUBLIC AUDITOR

This Campaign Statement of Account form is **mandatory**. Candidates may use the suggested reports and schedules furnished by the Election Commission, or they may use their own detailed formats. Should you use an alternative schedule format, you must provide, at the minimum, detailed information as required in the Act.

Candidate Name (Last Name, First Name, MI):	Office Sought:	
Taisacan, Richard E.	Mayor, Election District #7	
Treasurer Name (Last Name, First Name, MI):	Preferred Mailing (P.O. Box) Address:	Telephone:
Sasaki, Jacqueline M.	P.O. Box 511573, Rota MP 96951	1-670-285-7424

		CASH.	IN-KIND
L	BALANCE CARRIED FORWARD FROM PREVIOUS ELECTION(S)	0	0
	ADD: RECEIPTS THIS ELECTION PERIOD		
2.	RECEIPT FROM FUNDRAISING EVENTS	0	0
3.7	MULTI-CANDIDATE CONTRIBUTIONS	0	0
4.	RECEIPTS FROM GENERAL CONTRIBUTIONS	0	\$ 565.50
5.	OTHER RECEIPTS	0	ψ 303.30 0
6.	TOTAL AVAILABLE (Add Lines 1 through 5)	0	\$ 565.50
	LESS: DISBURSEMENTS THIS ELECTION PERIOD		Ψ 000.00
7.	DISBURSEMENTS FOR FUNDRAISING EVENTS	0	0
8.	MULTI-CANDIDATE EXPENSES	0	0
9.	DISBURSEMENTS FOR GENERAL EXPENDITURES	0	\$ 565.50
10.	OTHER DISBURSEMENTS	0	φ 303.30
11.	TOTAL DISBURSEMENTS (Add Lines 7 through 10)	0	\$ 565.50
12.	EXCESS (SHORTFALL) OF RECEIPTS OVER DISBURSEMENTS (Subtract Line 11 from Line 6)	0	0

	- VIDE LO	6 time 6 st	
	VERIFI	CATION	المستخلف والمستور
Commonwealth of the Northern M	ariana Islands)	Commonwealth of the Northern Mariana Islands)	
Island of) s.s.)	Island of) s.	S
Statement of Account, that I have a and that the contents thereof, include attachments, are a true, full and exp and expenses incurred in aid of the information herein may subject me	being duly sworn on oath, depose and say: ove; that I prepared the foregoing Campaign used all diligence in preparing this Statement, ding the contents of all supporting of its accounting of all contributions received campaign. I understand that providing false to civil and criminal penalties as provided by ion Reform Act of 2000, 1 CMC §6428.	I, Jacqueline M. Sasaki , being duly swo (Treasurer) That I am the individual named above; that I prepare Statement of Account, that I have used all diligence and that the contents thereof, including the contents attachments, are a true, full and explicit accounting and expenses incurred in aid of the campaign. I unde information herein may subject me to civil and crimithe Northern Mariana Islands Election Reform Act of	in preparing this Statement, of all supporting of all contributions received erstand that providing false and penalties as provided by
Signature of Candidate	Date (Month, Day, Year)	Signature of Treasurer	Olloz/19 Date (Month, Day, Year)
Subscribed and swom before me the	is 8th day of JANUARY, 20 19	Subscribed and sworn before me this M day of	1
Notary Stamp	M alaxana	Notary Stamp	Notary Scal
3 40 11 5	JONALYN ASHLEY E. UGABA NOTXRY PUBLIC	RYAN MANALAC	10,401 VAI
FD-001, Revised October 9, 2018	In and for Guam, U.S.A. My Commission Expires: JUNE 13, 20 155 E.T. Calvo Memorial Prkwy Ste 100 Tamuning, GU 969	In and for Guam, U.S.A. My Commission Expires: MAY 09, 202- 155 E.T. Calvo Memorial Parkway Suite 160 Tamunig, GU 969	PUBLY

COMMONWEALTH OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

FUNDRAISING EVENT REPORT

FUNDRAISING DATES: None Scheduled

IMPORTANT: USE A **SEPARATE** REPORT FOR **EACH** FUNDRAISING EVENT.

Candidate Name (Last Name, First Name, MI): Taisacan, Richard E.	Treasurer Full Name (Last Name, First Name, MI): Sasaki, Jacqueline M.
Name of Fundraising Event: Not Applicable	Not Applicable

SUMMARY OF FUNDRAISING RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

E-L	CEIPTS	CASH	IN-KIND
1.	GROSS PROCEEDS FROM FUNDRAISING EVENT (Total Cash Proceeds from Line 3 of the Result Summary of Supporting Schedule FR-A)	0	
2.	IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule FR-B. Bring down this value to Line 6 below.)		
3,	CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule FR-C)		
4.	TOTAL RECEIPTS (Add Lines 1 through 3) (Transfer to Line 2 of Campaign Statement of Account)		
DIS	BURSEMENTS		
DIS	FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A)	O	
	FUNDRAISING EXPENSES	0	
5.	FUNDRAISING EXPENSES (Total Fundraising Expenses from Line 4 of Result Summary of Schedule FR-A) ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED	0	

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): None Scheduled

PAGE 1 OF 1

Candidate Name (In Full): Taisacan, Richard E.	Signature of Treasurer:	Date: 191

SUPPORTING SCHEDULE FR-A GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT

1. TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500 \$ 0 2. TOTAL CASH PROCEEDS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 (Details on Section 1 below) + 0 3. TOTAL CASH PROCEEDS FROM FUNDRAISING EVENT (Transfer this total to Line 1 of Fundraising Event Report) 0 4. TOTAL FUNDRAISING EXPENSES (Details of Section 2-Fundraising Expense on the reverse side of this form. Transfer this total to Line 5 of Fundraising Event Report) 5. NET CASH PROCEEDS (Subtract Line 4 from Line 3)

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Mr. John Doe	\$ 600.00		
			,
		X	
	_		
OTAL PROCEEDS OF CONTRIBUTIONS, IF LAST AGE OTHERWISE CONTINUE ON NEXT COLUMN	0	TOTAL PROCEEDS OF CONTRIBUTIONS \$500 OR MORE (LAST PAGE ONLY-MUST AGREE WITH LINE 2 ABOVE)	0

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVENT HELD ON DATE(S): None Scheduled

PAGE 1 OF 1

Candidate Name	(In Full):	
Taisacan,	Richard	E.

Signature of Treasurer:	
1	
/	

SUPPORTING SCHEDULE FR-A

GROSS PROCEEDS AND EXPENSES FROM FUNDRAISING EVENT

SECTION 2 – FUNDRAISING EXPENSES

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/ DESCRIPTION		A	MOUNT		
	DESCRIPTION	Food & Drinks	Advertising	Supplies	Fees/Donation	Other
Example: Taste Good Restaurant	Food Catering	\$ 600				
_						
OTAL FUNDRAISING EXPENSES Transfer Total to Line 4, Result Summary of Schedule FR-A)	(Total)	0	0	0	0	0

IMPORTANT: FILE SEPARATE SCHEDULE FOR EACH FUNDRAISING EVENT.

SUPPORTING SCHEDULE FOR FUNDRAISING EVE	ENT HELD ON DATE(S): None Scheduled	PAGE 1 OF 1
Candidate Name (In Full): Taisacan, Richard E.	Signature of Treasurer:	Date: 01/02/19

SUPPORTING SCHEDULE FR-B IN-KIND CONTRIBUTIONS RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE	
Example: ABC Retail	Give-away t-shirts (250 @ \$5.00)	\$	1,250
100	8		
CUD TOTAL OF DECREPTS TWO DAMES ON A			
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)	>		0
FOTAL RECEIPTS (IF LAST PAGE ONLY)	⇒		0

SUPPORTING SCHEDULE FR-C CONTRIBUTED PROPERTY RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION		FAIR MARKET VALUE		
Example: Island Computers	Old Computer with printer	\$		600	
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY					
Use additional sheets as necessary)				0	
FOTAL RECEIPTS (IF LAST PAGE ONLY)				0	

COMMONWEALT OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

GENERAL CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): Taisacan, Richard E.	Treasurer Full Name (Last Name, First Name, MI): Sasaki, Jacqueline M.

SUMMARY OF RECEIPTS AND DISBURSEMENTS

(Complete Supporting Schedules Before Completing This Section)

RE	CEIPTS	CASH	IN-KIND
1	MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS (Total Contributions from Schedule GC-A)	0	
2.	IN-KIND CONTRIBUTIONS RECEIVED (Total In-Kind Contributions Received from Schedule GC-B. Bring down this value to Line 7 below.)		\$ 565.50
3.	CONTRIBUTED PROPERTY RECEIVED (Total Contributed Property Received from Schedule GC-C)		0
4.	TOTAL RECEIPTS (Transfer to Line 4 of Campaign Statement of Account)		\$ 565.50
DIS	BURSEMENTS		
5,.	GENERAL EXPENDITURES (Total General Expenditures from Schedule GC-D)	0	
6.	CONTRIBUTIONS TO OTHER CANDIDATES (Total Contribution to Other Candidates from Schedule GC-E)	0	
7.	ADJUSTMENTS FOR IN-KIND CONTRIBUTIONS RECEIVED (From Line 2 above)		\$ 565.50
7.			\$ 565.50 \$ 565.50

PAGE 1 OF 1

Candidate Name (In Full):
Taisacan, Richard E.

Signature of Treasurer:

01/02/19

SUPPORTING SCHEDULE GC-A MONETARY CONTRIBUTIONS FROM NON-FUNDRAISING EVENTS

1. TOTAL MONETARY CONTRIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED LESS THAN \$500 2. TOTAL MONETARY CONTRIBUTIONS FROM INDIVIDUALS WHO CONTRIBUTED MORE THAN \$500 3. TOTAL MONETARY CONTRIBUTIONS (Transfer to Line 1 of the General Contribution and Expense Report)

FULL NAME OF CONTRIBUTOR	AMOUNT	FULL NAME OF CONTRIBUTOR	AMOUNT
Example: Ms. Jane Doe	\$ 1,500.00		
OTAL CONTRIBUTIONS RECEIVED, IF LAST PAGE OTHERWISE CONTINUE ON NEXT COLUMN	0	TOTAL CONTRIBUTIONS RECEIVED (LAST PAGE ONLY) (Transfer to Line 2 of Result Summary above)	0

PAGE 1 OF 1

Candidate Name (In Full):	Signature of Treasurer:	Date:	1 1	_
Taisacan, Richard E.		011	02/10	9
			00/	_

SUPPORTING SCHEDULE GC-B IN-KIND CONTRIBUTIONS RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION		R MARKET VALUE
Example: ABC Retail	Give-away t-shirts (250 @ \$5.00)	\$	1,250
Melchor Mendiola R# 0713-2	10 Cs Beer/ 10 Cs Soda		565.50
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY			565.50
(Use additional sheets as necessary) TOTAL RECEIPTS (IF LAST PAGE ONLY)			
(Transfer Total to Line 2 of the General Contribution and Expense Report, Summary of Receipts and Disbursements)			565.50

SUPPORTING SCHEDULE GC-C CONTRIBUTED PROPERTY RECEIVED

FULL NAME OF CONTRIBUTOR	DESCRIPTION OF CONTRIBUTION	FAIR MARKET VALUE		
Example: Island Computers	Old Computer with printer	\$	600	
SUB-TOTAL OF RECEIPTS THIS PAGE ONLY (Use additional sheets as necessary)		⇒	C	
TOTAL CONTRIBUTED PROPERTY RECEIVED		⇒	0	

SUPPORTING SCHEDULE FOR	GENERAL CONTRIBUTION	IS
-------------------------	----------------------	----

PAGE _ 1 OF _ 1

Candidate Name (In Full):

Taisacan, Richard E.

Signaturer:

SUPPORTING SCHEDULE GC-D GENERAL EXPENDITURES

FULL NAME OF PAYEE OR VENDOR	PARTICULARS/	AMOUNT				
FULL NAME OF PATEE OR VENDOR	DESCRIPTION	Food & Drinks	Advertising	Supplies	Fees/Donation	Other
Example: Marianas Daily	One-page ad		\$ 500			
		1				
	-					
			1			
				Tan Tan		
	-					
					::	
GUB-TOTAL OF PAYMENTS THIS PAGE	(Sub-total)		-			
ONLY (Use additional sheets as necessary)	0 🖛	0	0	0	0	0
TOTAL GEN. EXPENDITURES (IF LAST	(Total)					
PAGE ONLY) (Transfer Total to Line 5 of Gen. Contributions & Exp. Report, Summary of Receipts	0 🖘	0	0	0	0	0
nd Disbursements)	,					

SUPPORTING SCHEDULE FOR GENERAL CONTRIBUTIONS

PAGE 1 OF 1

Candidate Name (In Full): Taisacan, Richard E.	Signature of Treasurer:	Date:	102	://	1
			0.7		

SUPPORTING SCHEDULE GC-E CONTRIBUTIONS TO OTHER CANDIDATES (EXPENDITURES)

FULL NAME OF PAYEE	DESCRIPTION	AMOUNT		
Example: Mr. Winning Candidate Like Me	Fundraising tickets purchased (10 tickets @ \$50)	\$ 50		
		1		
UB-TOTAL OF EXPENSES THIS PAGE ONLY				
Jse additional sheets as necessary)		0		
OTAL CONTRIBUTIONS TO OTHER CANDII	DATES (IF LAST PAGE ONLY) Denses Report, Summary of Receipts and Disbursements)	0		

COMMONWEALT OF THE NORTHERN MARIANA ISLANDS CAMPAIGN FINANCIAL DISCLOSURE

MULTI-CANDIDATE CONTRIBUTION AND EXPENSE REPORT

Candidate Name (Last Name, First Name, MI): Taisacan, Richard E.	Treasurer Full Name (Last Name, First Name, MI): Sasaki, Jacqueline M.

CONTRIBUTIONS RECEIVED

RECEIVED FROM Example: BEST PARTY IN THE LAND	DESCRIPTION Cash Allocation of Party General Fundraising Proceeds	AMOUNT	
		\$	20,000
SUB-TOTAL OF CONTRIBUTIONS RECEIVED	(THIS PAGE ONLY)		
(Use additional sheets as necessary)			0
TOTAL CONTRIBUTIONS RECEIVED (IF LAST PAGE ONLY) (Transfer Total to Line 3 of the Campaign Statement of Account)			0

EXPENSES

FULL NAME OF PAYEE	DESCRIPTION OF EXPENDITURE Allocation of Party General Expenses	AMOUNT	
Example: BEST PARTY IN THE LAND		\$	15,000
			_
SUB-TOTAL OF EXPENSES THIS PAGE ONLY (Use additional sheets as necessary)			0
TOTAL ALLOCATED EXPENDITURES (IF LAST PAGE ONLY) (Transfer Total to Line 8 of the Campaign Statement of Account)			0